

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004964

FILED  
Jan 17, 2012  
Secretary of State

**Entity Name:** SCOTTSMOOR COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

SCOTTSMOOR MEETING HALL  
CORNER OF MAGOON & STAMFORD  
SCOTTSMOOR, FL 32775 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 657  
SCOTTSMOOR, FL 32775 US

**New Mailing Address:**

FEI Number: 34-4508142

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BIRD, ROBERT L  
6065 MAGNOLIA STREET  
MIMS, FL 32754 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BENSON, ARNOLD  
Address: 5751 STAMFORD STREET  
City-St-Zip: MIMS, FL 32754 US

Title: VP  
Name: ROBBINS, ROBERT  
Address: 6050 OAK STREET  
City-St-Zip: MIMS, FL 32754 US

Title: T  
Name: KYLE, BRYAN  
Address: P.O. BOX 503  
City-St-Zip: SCOTTSMOOR, FL 32775 US

Title: S  
Name: BIRD, ROBERT L  
Address: 6065 MAGNOLIA STREET  
City-St-Zip: MIMS, FL 32754 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT L. BIRD

S

01/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date